## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

**Application or Docket Number** 

0 974 2686

| . CLAIMS AS FILED - PART I                     |   |   |                                       |                              |               |                    | SMALL ENTITY  |               |                        |         | OTHER THAN          |                        |
|--|---|---|---------------------------------------|------------------------------|---------------|--------------------|---------------|---------------|------------------------|---------|---------------------|------------------------|
| TOTAL CLAIMS                                   |   |   | (Column                               | 1)                           | (Colu         | mn 2)              | TYP           |               |                        | OR      | SMALL               | ENTITY                 |
| TOTAL CLAIMS                                   |   |   |                                       |                              |               |                    | R/            | ATE.          | FEE                    |         | RATE                | FEE                    |
| FOR  |   |   | NUMBER FILED                          |                              | NUMBER EXTRA  |                    | BAS           | C FEE         | 355.00                 | OR      | BASIC FEE           | 710.00                 |
| TOTAL CHARGEABLE CLAIMS                        |   |   | // minus 20=                          |                              | . 28          |                    | X             | 9=            | Φ                      | OR      | X\$18=              | 504                    |
| INDEPENDENT CLAIMS                             |   |   |                                       | nus 3 =                      | 7             |                    | X4            | 10=           | o                      | OR      | X80=                | 560                    |
| MU   | LTIPLE DEPEN  | IDENT CLAIM P                             | RESENT                                |                              |               |                    | +1            | 35=           | 0                      | OR      | +270=               | . 0                    |
| * If   | the difference  | in column 1 is                            | less than zero, enter "0" in column 2 |                              |               |                    | ТО            | TAL           | 0                      | OR      | TOTAL               | (774                   |
| CLAIMS AS AMENDED - PART II                    |   |   |                                       |                              |               |                    |               |               |                        | •       | OTHER               | THAN                   |
|  |   | (Column 1)                                |                                       | (Column 2)<br>HIGHEST        |               |                    | SMALL ENTITY  |               |                        | OR      | SMALL               |                        |
| AMENDMENT A                                    |   | REMAINING<br>AFTER<br>AMENDMENT           |                                       | NUM<br>PREVIO<br>PAID        | BER<br>OUSLY  | PRESENT<br>EXTRA   | RA            | TE            | ADDI-<br>TIONAL<br>FEE |         | RATE                | ADDI-<br>TIONAL<br>FEE |
|  | Total   | *   | Minus                                 | **                           |               | =                  | X\$           | 9=            |                        | OR      | X\$18=              |                        |
|  | Independent   | *   | Minus                                 | ***                          | F CLAIM       | =                  | X4            | 0=            | -                      | OR      | X80=                |                        |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |   |   |                                       |                              |               |                    |               | 35=           |                        | OR      | +270=               |                        |
|  |   |   |                                       |                              |               |                    |               | OTAL<br>FEE   |                        | OR      | TOTAL<br>ADDIT. FEE |                        |
|  |   | (Column 3)                                | ווטטא                                 |                              |               |                    | ADDI1. 1 L.E. |               |                        |         |                     |                        |
| AMENDMENT B                                    |   | (Column 1) CLAIMS REMAINING               |                                       | (Colui                       | EST           |                    |               |               | ADDI-                  | •       |                     | ADDI-                  |
|  |   | AFTER<br>AMENDMENT                        |                                       | NUM<br>PREVIO<br>PAID        | OUSLY         | PRESENT<br>EXTRA   | RA            | TE            | TIONAL<br>FEE          |         | RATE                | TIONAL<br>FEE          |
|  | Total   | *   | Minus                                 | **                           |               | =                  | X\$           | 9=            |                        | OR      | X\$18=              |                        |
|  | Independent   | NTATION OF MI                             | Minus                                 | ***                          | C C A IM      |                    | X4            | 0=            |                        | OR      | X80=                |                        |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |   |   |                                       |                              |               |                    |               | 35=           |                        | OR      | +270=               |                        |
|  |   |   |                                       |                              |               |                    |               |               |                        | OR      | TOTAL               |                        |
|  |   | ADDIT                                     | . FEE I                               |                              | •             | ADDIT. FEE         |               |               |                        |         |                     |                        |
| AMENDMENT C                                    |   | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                                       | HIGH<br>NUM<br>PREVI<br>PAID | IBER<br>OUSLY | PRESENT<br>EXTRA   | RA            | TE            | ADDI-<br>TIONAL<br>FEE |         | RATE                | ADDI-<br>TIONAL<br>FEE |
|  | Total   | •   | Minus                                 | **                           |               | =                  | X\$           | 9=            |                        | OR      | X\$18=              |                        |
|  | Independent   | *   | Minus                                 | ***                          | T OL 411:     | =                  | X4            | 0=            |                        | OR      | X80=                |                        |
| L  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM  |   |                                       |                              |               |                    |               | 35=           |                        | 1       | <b> </b>            |                        |
|  | <ul> <li>If the entry in column 1 is less than the entry in column 2, write "0" in column 3.</li> </ul> |   |                                       |                              |               |                    |               |               |                        | OR      | +270=               |                        |
| **   | If the "Highest Nu  | mber Previously Pumber Previously P       | aid For" IN TH                        | IS SPACE                     | is less tha   | an 20. eater "20 " | ADDIT         | OTAL<br>. FEE |                        | OR      | TOTAL<br>ADDIT. FEE |                        |
|  | The "Highest Nur  | nber Previously Pa                        | id For" (Total o                      | or Independ                  | dent) is the  | e highest number   | found in      | the ap        | propriate bo           | x in co | olumn 1.            |                        |